## MAND DELIVERED

24/48 HOUR REPORT OF INDEPEN Schedule E)	DENI EXPENDI	TURES *** 4	•	PAGE 1 OF 6	
NAME OF COMMITTEE (In Full)		RECE	MED FEOR	FOR SE OF FORM 24/48  DENTIFICATION NUMBER ▼	
NRSC				<del>~~~~~~</del>	
	44.	2614 SEP 11	12 2: n <b>19</b>	C00027466	
Check if 24-hour report 48-hour repor	nt New repo	ort America Hepo	f med on Man	1 000 / 000000	
Full Name of Payee NATIONAL MEDIA RESEARC	H, PLANNING,	& PLACEMENT	Date of Publ	ic Distribution/Dissemination	
Mailing Address 815 SLATERS LANE	<u></u>		Amount	2017	
City	State	Zip Code		1650.00	
ALEXANDRIA	VA	22314	I	ID : SE24.290978 oursement or Obligation	
Purpose of Expenditure DIGITAL MEDIA		Category/ Type	09	/ 09 / 2014	
Name of Federal Candidate		Support	Office Sought:	House District: 00	
MARK PETER BEGICH		Oppose	President	Senate State: AK	
Calendar Year-To-Date Per Election for Office Sought		47562.69	Disbursement For:	Primary ☐ General	
Full Name of Payee		*******		lic Distribution/Dissemination	
NATIONAL MEDIA RESEARCH,	PLANNING, & P	PLACEMENT	M M M	, D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 815 SLATERS LANE			Amount	لحضي لصنف	
City	State	Zip Code		3333.33	
ALEXANDRIA	VA	22314		ID: SE24.290979 oursement or Obligation	
Purpose of Expenditure DIGITAL MEDIA		Category/ Type	09 <sup>M</sup>	/ D D / 2014	
Name of Federal Candidate		Support	Office Sought:	House District: 00	
MARK PETER BEGICH		Oppose	President	Senate State: AK	
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	1747562.69	Disbursement For: 2014 Other (s	Primary ⊠ General	
(a) SUBTOTAL of Itemized Independent Expe	enditures		• •	4983.33	
(b) SUBTOTAL of Uniternized Independent E	xpenditures	•••••••••••••••••••••••••••••••••••••••	·· •		
(c) TOTAL Independent Expenditures			L-22	<del>~~~~~~~~</del>	
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Jay Banning	63	_ Date	9 09 11	2014	
Signature					

24/48 HOUR REPORT OF INDEPENDE (Schedule E)	:NI EXPEND	IIURES			2 OF 6
					OF FORM 24/48
NAME OF COMMITTEE (In Full) NRSC				C C00027466	<del></del>
Check if 24-hour report 48-hour report	New rep	oort Amends repo	rt filed on	/ 6°6	·
Full Name of Payee NATIONAL MEDIA RESEARCH,	PLANNING,	& PLACEMENT	Date of	of Public Distribution	/ <del>                                     </del>
Mailing Address 815 SLATERS LANE			Amou	09 09 nt	2014
Cit.	Ctato	7:- C-do			167001.04
City  ALEXANDRIA	State VA	Zip Code 22314	I	action ID : SE24.2	
Purpose of Expenditure MEDIA PLACEMENT/PRODUCTION		Category/ Type		09 04	2014
Name of Federal Candidate		Support	Office Sough	t: House	District: 00
MARK LUNSFORD PRYOR		Oppose	Preside	<u> </u>	State: AR
		N oppos	├		
Calendar Year-To-Date Per Election for Office Sought		556384.52	Disbursemen 2014 O	t For: Prima ther (specify) ▶ _	ary 🔀 General
Full Name of Payee NATIONAL MEDIA RESEARCH, P	LANNING, & F	PLACEMENT	Date	of Public Distributi 09 09	on/Dissemination / 2014
Mailing Address 815 SLATERS LANE			Amou	int	
City	State	Zip Code			524056.40
ALEXANDRIA	VA	22314		of Disbursement of	
Purpose of Expenditure MEDIA PLACEMENT/PRODUCTION		Category/ Type		09 / 04 D	2014
Name of Federal Candidate		Support	Office Sough	nt: House	District:00
MARY MICHELLE NUNN		∑ Oppose	Presid		-
Calendar Year-To-Date Per Election for Office Sought		2587355.42	Disbursemer 2014	nt For: Prim	ary X General
(a) SUBTOTAL of Itemized Independent Expend	itures				691957.44
(b) SUBTOTAL of Uniternized Independent Expe	enditures		· • [		
(c) TOTAL Independent Expenditures			·· •		
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any can party committee) any political party committee or	didate or authorize				
Signature	<u> </u>	Date	e 09	11 / 7	2014

#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES PAGE OF 6 (Schedule E) FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ **NRSC** C00027466 X 48-hour report Check if 24-hour report New report | Amends report filed on Full Name of Payee Date of Public Distribution/Dissemination NATIONAL MEDIA RESEARCH, PLANNING, & PLACEMENT 09 09 2014 Mailing Address 815 SLATERS LANE **Amount** City State Zip Code 22700.00 Transaction ID: SE24.290982 VΑ 22314 **ALEXANDRIA** Date of Disbursement or Obligation Purpose of Expenditure Category/ MEDIA PLACEMENT/PRODUCTION 80 2014 Туре Name of Federal Candidate 00 Support Office Sought: House District: MARY MICHELLE NUNN GΑ X Senate X Oppose President State: ✓ General Disbursement For: Primary Calendar Year-To-Date 2587355.42 2014 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination NATIONAL MEDIA RESEARCH, PLANNING, & PLACEMENT 2014 09 09 Mailing Address 815 SLATERS LANE **Amount** City State Zip Code 3333.33 Transaction ID: SE24.290983 ALEXANDRIA VA 22314 Date of Disbursement or Obligation Purpose of Expenditure Category/ DIGITAL MEDIA 09 09 2014 Type Name of Federal Candidate 00 Support Office Sought: House District: \_ MARY MICHELLE NUNN GΑ X Oppose Senate President State: General Disbursement For: Primary Calendar Year-To-Date 2587355.42 Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures..... 26033.33 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Jay Banning 2014 Signature

#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES **PAGE** OF (Schedule E) FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ **NRSC** C00027466 X 48-hour report New report | Amends report filed on 24-hour report Full Name of Payee Date of Public Distribution/Dissemination NATIONAL MEDIA RESEARCH, PLANNING, & PLACEMENT 09 09 2014 Mailing Address 815 SLATERS LANE **Amount** City State Zip Code 258301.36 Transaction ID: SE24.290984 ALEXANDRIA VA 22314 Date of Disbursement or Obligation Purpose of Expenditure Category/ MEDIA PLACEMENT/PRODUCTION 04 Туре Name of Federal Candidate 00 Support Office Sought: House District: **BRUCE LOWELL BRALEY** X Oppose $\times$ President Senate State: ✓ General Disbursement For: Primary Calendar Year-To-Date 1023828.28 2014 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination NATIONAL MEDIA RESEARCH, PLANNING, & PLACEMENT 09 09 2014 Mailing Address 815 SLATERS LANE **Amount** City State Zip Code 10059.20 Transaction ID: SE24.290985 VA **ALEXANDRIA** 22314 Date of Disbursement or Obligation Purpose of Expenditure Category/ MEDIA PLACEMENT/PRODUCTION 04 2014 Type Name of Federal Candidate 00 Support Office Sought: House District: **BRUCE LOWELL BRALEY** Oppose President X Senate State: X General Disbursement For: Primary Calendar Year-To-Date 1023828.28 Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures..... 268360.56 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Jay Banning 09 2014 Signature

### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES PAGE OF (Schedule E) FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ **NRSC** C00027466 X 48-hour report New report | Amends report filed on Check if 24-hour report Full Name of Payee Date of Public Distribution/Dissemination NATIONAL MEDIA RESEARCH, PLANNING, & PLACEMENT 09 09 2014 Mailing Address 815 SLATERS LANE Amount State Zip Code 104002.80 City VA Transaction ID: SE24.290986 **ALEXANDRIA** 22314 Date of Disbursement or Obligation Purpose of Expenditure Category/ MEDIA PLACEMENT/PRODUCTION Type Name of Federal Candidate 00 Office Sought: District: Support House **BRUCE LOWELL BRALEY** IΑ ○ Oppose President |X | Senate State: Disbursement For: Primary ✓ General Calendar Year-To-Date 1023828.28 2014 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination NATIONAL MEDIA RESEARCH, PLANNING, & PLACEMENT 09 2014 Mailing Address 815 SLATERS LANE Amount City State Zip Code 149628.40 Transaction ID: SE24.290987 VA 22314 **ALEXANDRIA** Date of Disbursement or Obligation Purpose of Expenditure Category/ MEDIA PLACEMENT/PRODUCTION Type Name of Federal Candidate Office Sought: Support House District: **BRUCE LOWELL BRALEY** X Oppose X Senate President State: **General** Disbursement For: Primary Calendar Year-To-Date 1023828.28 Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures..... 253631.20 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Jay Banning 2014 Date Signature

24/48 HOUR REPORT OF INDEPEN (Schedule E)	DENI EXPENDI	TURES		PAGE 6 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) NRSC			FEC I	DENTIFICATION NUMBER ▼  C00027466
Check if 24-hour report 48-hour repor	rt New repo	ort Amends repo	ort filed on	, 600
Full Name of Payee NATIONAL MEDIA RESEARC	H, PLANNING,	& PLACEMENT		ic Distribution/Dissemination
Mailing Address 815 SLATERS LANE		•	09 Amount	09 2014
City ALEXANDRIA	State VA	Zip Code 22314		310708.00 ID : SE24.290988 ursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT/PRODUCTION		Category/ Type	Date of Disb	/ DAB / Z014
Name of Federal Candidate  JANET KAY RUTHVEN HAGAN		Support Oppose	Office Sought:	House District: 00  Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		614005.80	Disbursement For: 2014 Other (s	Primary ⊠ General
Full Name of Payee			Date of Pub	lic Distribution/Dissemination
Mailing Address			Amount	للمستسيا للمسا
City	State	Zip Code	Sets of Diek	Obligation
Purpose of Expenditure		Category/ Type	Date of Dist	oursement or Obligation
Name of Federal Candidate		Support Oppose	Office Sought:  President	House District:
Calendar Year-To-Date Per Election for Office Sought	\$\$\$\$\$\$		Disbursement For:  Other (s	Primary General
(a) SUBTOTAL of Itemized Independent Expe	enditures		>	310708.00
(b) SUBTOTAL of Uniternized Independent E.	xpenditures		·· •	
(c) TOTAL Independent Expenditures			··· •	1555673.86
Under penalty of perjury I certify that the ind with, or at the request or suggestion of, any oparty committee) any political party committee	candidate or authorized	reported herein were	not made in cooper of either, or (if the re	ation, consultation, or concert porting entity is not a political
Jay Banning	. (.)	Date	ค 09 11	2014
Signature		_	ستسسا استنسا	

# Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
	Postmarked
USPS Priority Mail Express	Postmarkeu
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Busine	ess Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Receipt or Postmarked
づた	9/11/294
PREPARER (8/2013)	DATE PREPARED